

HEALTH AND MEDICAL AREA COMMAND SITUATION REPORT

PUBLIC HEALTH – SEATTLE AND KING COUNTY

REPORT #: 12	OPERATIONAL PERIOD: 11/30/09-12/7/09	DATE: 12/4/09	TIME: 15:00
Incident Name/Incident Type: H1N1 Influenza Response and Howard Hanson Dam/Green River Planning			MISSION #: H1N1: 09-2887 Howard Hanson Dam: 09-2821
Locations/Areas Affected: H1N1: King County; Howard Hanson Dam/Green River: City of Auburn, City of Kent, City of Renton, City of Tukwila, Unincorporated King County			
HEALTH AND MEDICAL AREA COMMAND CENTER (ACC) STATUS			
ACC Activation Status:	<u>ACTIVATED</u>		
Location:	<input checked="" type="checkbox"/> Primary Location <input type="checkbox"/> Alternate Site:		
Hours of Operations:	<input type="checkbox"/> 24 Hour Ops.	<input checked="" type="checkbox"/> Days/Hours: Monday - Friday 8 am - 5 pm	Off Hours Emergency Contact 24/7: Public Health Duty Officer

EMERGENCY PROCLAMATIONS/DECLARATIONS

JURISDICTIONS	NAME OF JURISDICTION	DATE	COMMENTS
County Proclamation:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Thursday, 9/10/09	The King County Executive proclaimed an emergency regarding potential flooding in the Green River Valley as a result of problems with the Howard Hanson Dam
Washington State Proclamation:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Federal Health Declaration:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Sunday, 4/26/2009	The Department of Health and Human Services issued a nationwide public health emergency declaration in response to recent human infections with a newly discovered swine influenza A (H1N1) virus
National Emergency Declaration	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Saturday, 10/24/09	The President declared a National Emergency for H1N1 Influenza through the National Emergencies Act, which allows healthcare facilities to petition for Social Security Act Section 1135 waivers for specific needs (i.e. waivers for specific EMTALA, HIPAA or CMS regulations).
Federal Disaster Declaration:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

RESPONSE GOALS

H1N1

- Protect the public's health by minimizing the spread of H1N1 influenza in the community
- Achieve situational awareness about flu activity in King County and impacts on the healthcare system and the broader community
- Support the informational and medical resource needs of healthcare partners
- Maintain consistent and timely public information about H1N1 flu and response activities
- Maximize availability of H1N1 vaccine to protect the public's health
- Maintain continuity of Public Health operations

Green River

- Mitigate the impact of flooding to healthcare partners and Public Health sites
- Establish plans to assist with evacuation and sheltering of the medically fragile
- Maintain consistent and timely messaging to the public and partners about the threat of the Green River flooding and impacts to the healthcare system
- Mitigate and monitor the Environmental Health impacts of a flood

SUMMARY OF EVENT

H1N1 Situation in King County:

- Emergency department (ED) visits for influenza like illness (ILI) have been decreasing for the past several weeks, and were back down to the range observed during the spring 2009 H1N1 outbreak for the week ending 11/28/09.
- Hospital admissions for laboratory-confirmed influenza have been decreasing for the past several weeks.
- Three deaths in King County residents confirmed to have 2009 H1N1 influenza have occurred since 11/22/09. All individuals, one a middle-aged man, one a middle-aged woman and one an elderly man, had underlying health conditions.
- The percentage of specimens testing positive for influenza from our outpatient surveillance system has been decreasing for the past several weeks.
- The proportion of deaths due to pneumonia and influenza has been below the epidemic threshold since mid-September.
- Eleven long-term care facilities have reported cases of influenza-like illness in their facilities since mid-October.
- Many schools were closed during the week ending 11/28/09, and so school absenteeism data should be interpreted with caution.

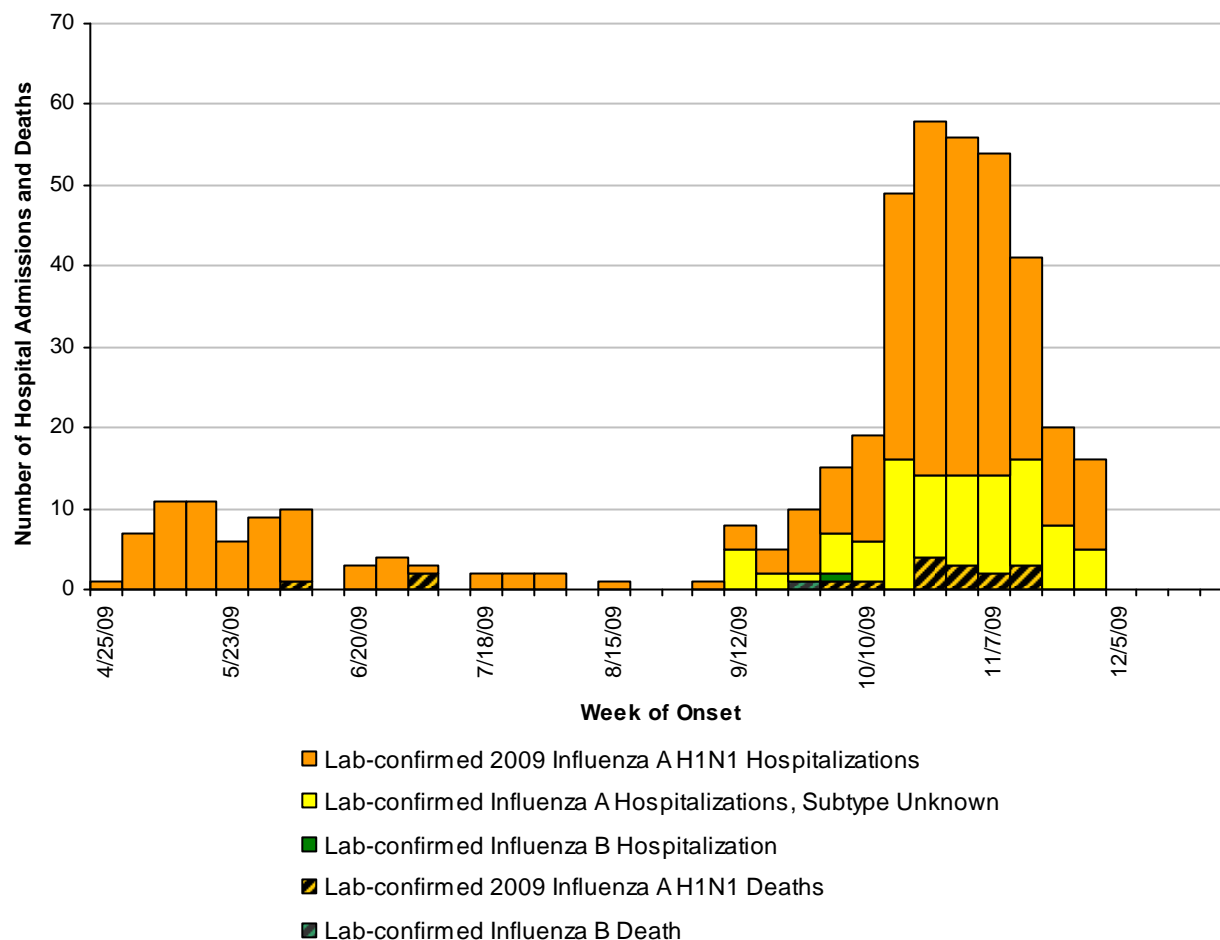
For information on current surveillance and testing guidelines for 2009 H1N1 influenza, see:
<http://www.kingcounty.gov/healthservices/health/preparedness/pandemicflu/swineflu/providers.aspx>.

Case counts, 2009-2010 flu season (updated 11/30/09).

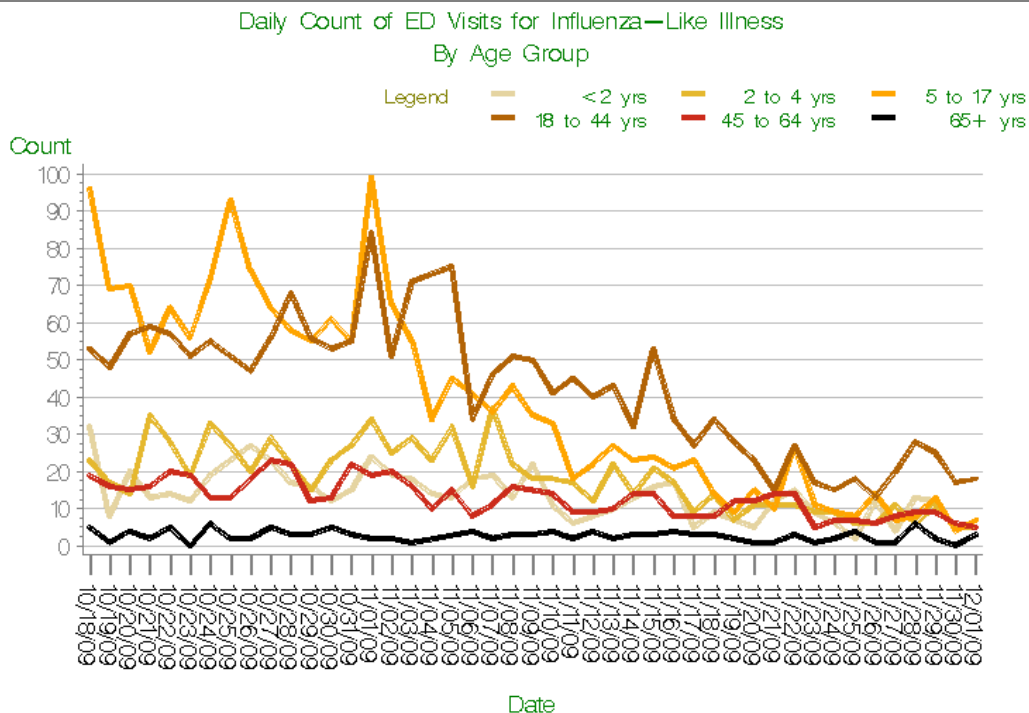
2009-2010 Influenza Season (starting October 5th):

Lab-confirmed 2009 Influenza A H1N1 Hospitalizations:	244
Lab-confirmed 2009 Influenza A H1N1 Deaths:	14
Lab-confirmed Influenza Hospitalizations, not H1N1 or not tested for H1N1:	86
Lab-confirmed Influenza Deaths, not H1N1 or not tested for H1N1:	0

Public Health - Seattle and King County
Hospital admissions and deaths due to laboratory-confirmed influenza



Syndromic Surveillance (updated 12/3/09): Emergency Department (ED) visits due to influenza like illness (ILI) have been decreasing for the past several weeks, and were back down to the range observed for the spring 2009 H1N1 outbreak for the week ending 11/28/09. The volume of ED ILI visits is currently highest among adults ages 18-44 years, followed by children ages 5-17 years. ED admissions for ILI increased through September and October, but have been decreasing since the start of November. Overall, the weekly count of ED admissions for pneumonia was on a downward trend from the peak in March 2009 through the end of September 2009, with increasing counts beginning in early October 2009. Among ED patients with pneumonia, the percent of admissions for the week ending 11/28/09 was lower than it was during the previous week.



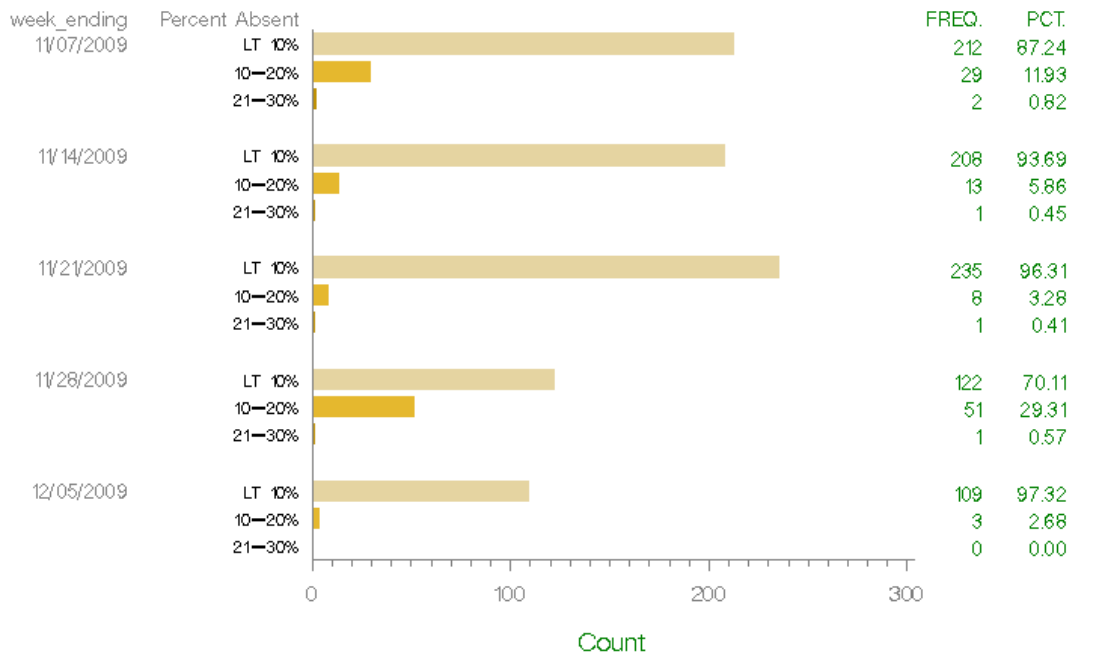
ALLHOSPITALS, Last Updated Dec 2, 2009

P & I (Pneumonia and Influenza) Deaths (updated 11/30/09): 13.9% of deaths were attributed to pneumonia and influenza during the period of 11/22/09 through 11/24/09. Data are not yet available regarding deaths that occurred during the remainder of week 47. The week 47 national epidemic threshold is not yet available. 6.9% of deaths were attributed to pneumonia and influenza during week 46, which was slightly below the national epidemic threshold of 7.0%. During the peak of flu season, the national epidemic threshold typically ranges from 7.5 – 8.0%. The last week the national threshold was exceeded was in mid-September (6.4% vs. 6.3%).

Long-term Care Facilities (updated 12/3/09): Public Health has received reports of ILI from eleven long-term care facilities since mid-October. In several instances, illness was limited to one resident, or to staff who did not have patient contact. Three facilities were recommended to initiate antiviral prophylaxis to limit further transmission among residents and staff.

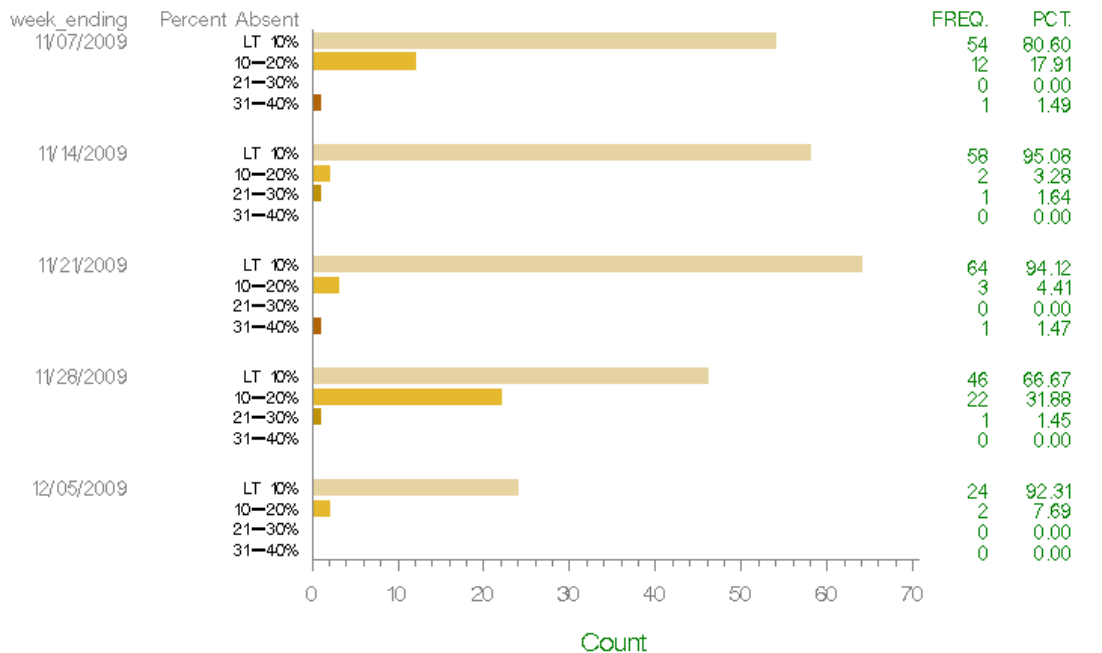
School Absenteeism (updated 12/3/09): Eighteen of 19 King County school districts are reporting absenteeism through our automated system. Historical data allowing examination of trends over time are only currently available for three districts. Many schools were not in session during week the week ending 11/28/09, and so the figures below should be interpreted with caution. In addition, absenteeism data are not yet available for many schools for the week ending 12/5/09.

Distribution of Absenteeism by Grade Level
Elementary Schools



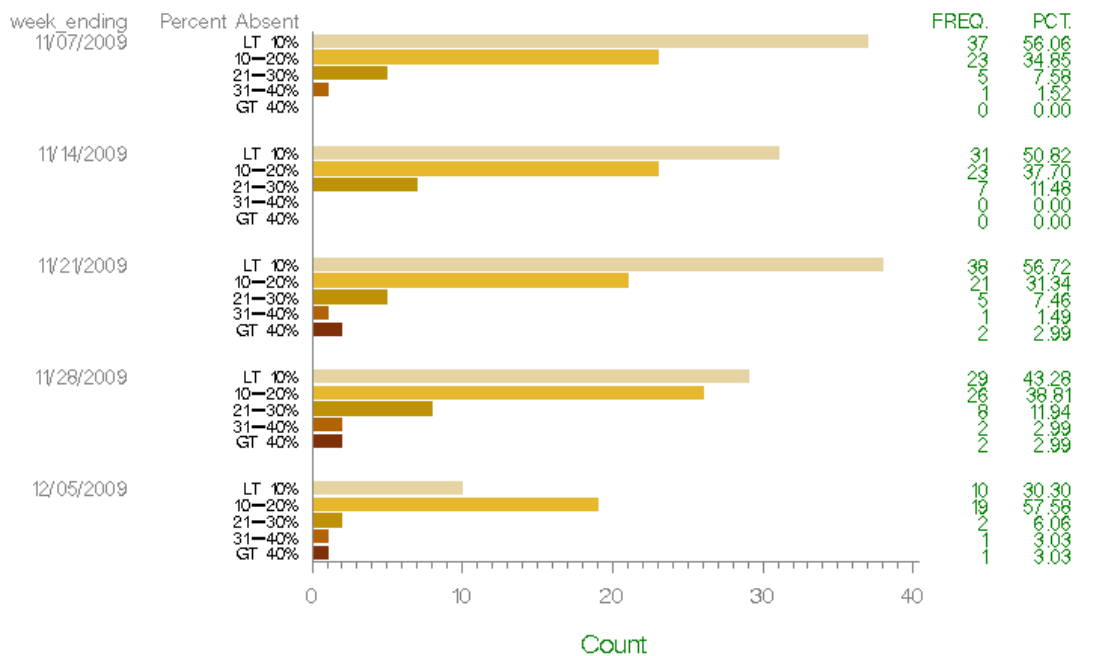
ALL Last Updated Dec 3, 2009

Distribution of Absenteeism by Grade Level
Middle Schools



ALL Last Updated Dec 3, 2009

Distribution of Absenteeism by Grade Level High Schools



ALL Last Updated Dec 3, 2009

H1N1 VACCINE

By Friday, December 4, we estimate that there have been 423,940 doses of vaccine delivered to King County for vaccination of persons in the prioritized target populations and that approximately 382,000 persons in the target populations have been vaccinated. Of the doses that have been received, 79% have gone to health care providers and hospitals, 11% to pharmacies, 7% to the public health system, and 2% to colleges and universities.

Free swine flu vaccinations for people who can't afford to pay: King County residents who can't afford to pay for H1N1 vaccination and are in one of the high-risk groups will have an opportunity to get vaccinated at 4 drop-in locations Saturday December 5th and Wednesday December 9th, or while supplies last. For more information on locations and hours, please visit: <http://www.kingcounty.gov/healthservices/health/preparedness/pandemicflu/swineflu/clinics.aspx>

Supply and Allocation Updates: Vaccine Supply and allocation updates are now being posted to our website on Fridays: Please visit www.kingcounty.gov/health/H1N1 for more detailed information.

Pharmacy Information: Pharmacies continue to receive small allocations of vaccine to provide to priority group members. More information about vaccination options at pharmacies, including locations, hours and contact information is available at <http://www.kingcounty.gov/healthservices/health/preparedness/pandemicflu/swineflu/pharmacies.aspx>

MEDICAL RESOURCES

Strategic National Stockpile (SNS) Personal Protective Equipment (PPE)

Due to the compliance requirements outlined by OSHA in their instruction document dated 11/20/09, the PPE Allocation Strategy is under review to ensure all factors have been considered prior to allocating Federal assets that are in short supply. Further direction on resource conservation strategies will likely be linked to the allocation strategy as well. Currently no PPE resources from the SNS have been allocated to healthcare partners.

Antiviral Dispensing in the Community

Prescriptions filled at community dispensing sites have increased slightly from last week. Prescriptions for 75mg Tamiflu is the most common request followed by pediatric oral suspension.

PUBLIC HEALTH FLU HOTLINE

The Public Health Flu Hotline is open and staffed with general operators and nurses to answer questions on general health and safety questions about H1N1 influenza, including home care, vaccine safety, and preventative tips. Call volumes have declined by nearly 50% since the previous week with call volumes averaging around 125 calls per 24 hour period. The Flu Hotline number is 1-877-903-KING (5464).

CURRENT GREEN RIVER SITUATION

Public Health - Seattle & King County (PHSKC) has been working with healthcare partners to identify risks and impacts of flooding to the healthcare system in the event of a significant Green River Valley flood. Multiple organizations have been identified in the Green River Valley that serve high risk individuals. Business continuity training and mitigation planning assistance have been provided to these organizations, helping them achieve higher levels of preparedness. PHSKC continues to coordinate with healthcare partners to mitigate impacts of the flood on the healthcare system overall.

Plans for medical needs shelters are in place and were developed in coordination with ESF-6, Mass Care and Human Services. ESF-8 also contributed to the development of transportation and evacuation plans for the medically fragile. These plans outline the process for organizing evacuation requests for medically fragile or non-ambulatory individuals.

PHSKC is also working with King County Office of Emergency Management and Department of Natural Resources and Parks to develop public education materials on environmental hazards associated with floods. The Environmental Health Division has expanded its call capacity in order to respond to an influx of inquiries from residents seeking guidance on flood related health issues.

HEALTH AND MEDICAL AREA COMMAND – OPERATIONAL OBJECTIVES

H1N1 Objectives

1. Maintain situational awareness regarding flu activity in King County and impacts on the healthcare system and the broader community
2. Monitor the Public Health Call Center to assess possible demobilization
3. Allocate available formulations for H1N1 vaccine
4. Implement operational plan for uninsured H1N1 vaccine strategy
5. Maintain timely and accurate H1N1 messaging and communications to providers, partners and the public

Green River Objectives

1. Maintain situational awareness regarding impacts of severe weather, including high winds, rain and flooding
2. Coordinate with local emergency managers and partners in affected jurisdictions to support outreach and planning for vulnerable populations

MAJOR ACTIONS

H1N1

- Ongoing influenza surveillance
- Operating Public Health Flu Hotline with general operators and nurses to answer H1N1 influenza questions with expanded nurse line service beginning this weekend.
- Developing communication materials and addressing media inquiries regarding H1N1 vaccine delivery
- Re-assessing N95 PPE allocation strategy in light of OSHA Instructions provided 11/20
- Managing allocation of available H1N1 vaccine formulations
- Preparing to implement Public Health H1N1 vaccine clinics for individuals who cannot afford to pay
- Collecting and analyzing H1N1 Healthcare Report

GREEN RIVER

- Continue working with local jurisdictions for development of plans on rally points (evacuation pick up points)
- Developing workgroup to facilitate discharge planning for the Medical Needs Shelter

- Built expanded Environmental Health call capacity in order to respond to an influx of inquiries from residents seeking guidance on flood related health issues

ESF-8 SITUATION STATUS REPORT – H1N1

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Approved for Distribution:  Date: 12-4-09

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